

Polypharmacy: Use of Multiple Anticholinergic Medications in Older Adults



At Wellcare, we value everything you do to deliver quality care to our members — your patients. We appreciate your commitment to their positive healthcare experience.

POLY-ACH Measure

The POLY-ACH measure in the Centers for Medicare & Medicaid Services (CMS) Star Ratings uses concurrent use of two or more anticholinergic medications for a significant period to evaluate health plans.

Quality Measure	Description
Polypharmacy: Use of Multiple Anticholinergic Medications in Older Adults (POLY-ACH)	Percentage of patients ages 65 years or older with concurrent use of two or more unique anticholinergic medications for 30 cumulative days.
POLY-ACH Exclusions	Patients enrolled in hospice.
Who qualifies for the measure?	Members, ages 65 years and older, with at least two prescription claims for the same anticholinergic medication with different dates of service.
Who is considered to be non-compliant with the measure?	Members who have at least two prescription claims of at least two unique anticholinergic medications with 30 days of overlapping use.

(continued)

For more than 20 years, Wellcare has offered a range of Medicare products, which offer affordable coverage beyond Original Medicare. Beginning Jan. 1, 2022, our affiliated Medicare product brands, including Allwell, Health Net, Fidelis Care, Trillium Advantage, and 'Ohana Health Plan transitioned to the newly refreshed Wellcare brand. If you have any questions, please contact Provider Relations.



By Allwell
By Fidelis Care
By Health Net
By 'Ohana Health Plan
By Trillium Advantage

Action

We have listed applicable therapeutic categories and anticholinergic medications below for easy reference.

Please consider avoiding initial use of multiple anticholinergic medications in the elderly and discontinue medications, as appropriate.

Tips for Success

- ✓ **Monitor progress/follow-up** with each appointment and taper down if taken long-term or high dose.
- ✓ **Limit prescriptions** on an as-needed indication (no refills, etc.).

*Note: This is **not** an all-inclusive list.*

Antihistamines	Antiemetics	Antidepressants
<ul style="list-style-type: none">• Cyproheptadine• Hydroxyzine• Meclizine	<ul style="list-style-type: none">• Prochlorperazine• Promethazine	<ul style="list-style-type: none">• Amitriptyline• Nortriptyline• Paroxetine
Skeletal Muscle Relaxants	Antipsychotics	Antimuscarinics
<ul style="list-style-type: none">• Cyclobenzaprine• Orphenadrine	<ul style="list-style-type: none">• Chlorpromazine• Clozapine• Olanzapine	<ul style="list-style-type: none">• Darifenacin• Oxybutynin• Trospium

Rationale

These recommendations are based on the American Geriatrics Society (AGS) Beers Criteria® list of potentially inappropriate or unsafe medications best avoided by older adults ages 65 and up. The list, updated by the AGS every three years, serves to help reduce adverse effects and improve patient safety.

2023 American Geriatrics Society Beers Criteria® for Potentially Clinically Important Drug Interactions That Should be Avoided in Older Adults Ages 65 and Up		
Drug Class	Interacting Drug Class	Risk Rationale
Anticholinergic	Anticholinergic	Use of more than one medication with anticholinergic properties increases risk of side effects such as dry mouth/eyes, impaired cognition, urinary retention, sedation, delirium, and risk of falls leading to fractures.



We recognize that you are best qualified to evaluate the potential risks versus benefits in choosing the most appropriate medications for your patients.

Reference Alternative Treatments to Selected Medications in the 2023 American Geriatrics Society Beers Criteria® <https://agsjournals.onlinelibrary.wiley.com/doi/epdf/10.1111/jgs.19500>